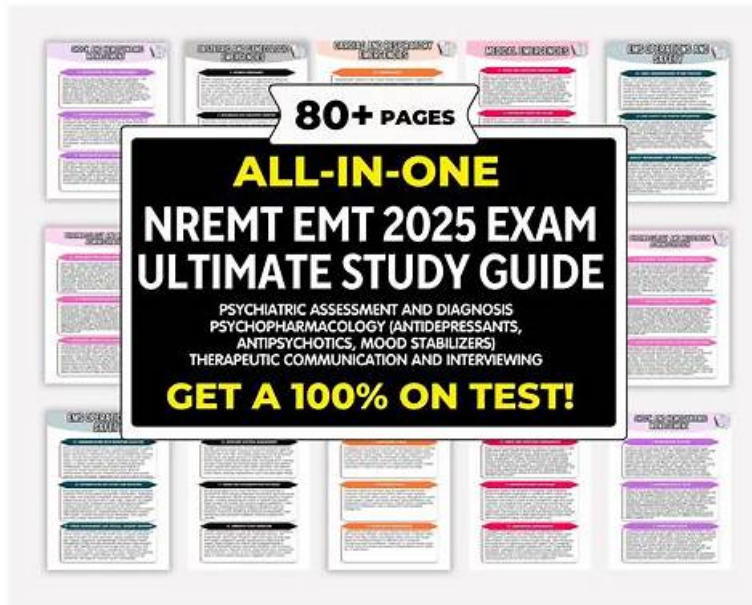


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## Following is the Test Prep EMT Exam Format

Format: Multiple choices, multiple answers

- Length of Examination: 120 minutes
- Number of Questions: 70-120
- Passing score: 70%
- Language: English

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## NREMT Emergency Medical Technicians Exam Sample Questions (Q41-Q46):

### NEW QUESTION # 41

A 65-year-old patient with a history of angina reports chest pain and shortness of breath after playing golf.

The patient stated the pain began one hour ago and has not stopped with rest. The vital signs are BP 86/64, P 112, R 22, and SpO# 89% on room air. Which of the following actions should the EMT do next?

- A. Give nitroglycerin
- B. Provide nebulized albuterol
- C. Administer CPAP
- **D. Obtain a 12-lead ECG**

**Answer: D**

Explanation:

This is a high-risk cardiac event due to unstable angina or possible myocardial infarction. The EMT should:

- \* Administer oxygen if SpO# is < 94%
- \* Avoid nitroglycerin if systolic BP is < 90 mmHg
- \* Obtain a 12-lead ECG to identify ST-elevation MI (STEMI) and transmit it if trained and authorized CPAP is indicated for pulmonary edema, and albuterol is for bronchospasm, neither of which applies here.

References:

AHA ACLS and BLS Guidelines - ACS Management

NREMT Cardiology Guidelines - Chest Pain/MI

National EMS Education Standards - Cardiovascular Emergencies and ECG Recognition

#### NEW QUESTION # 42

A 10-year-old patient is in hypovolemic shock. Which of the following signs would be early indicators of shock for this patient? Select the three correct options.

- A. Blood glucose level
- **B. Heart rate**
- C. SpO#
- **D. Capillary refill**
- E. Blood pressure
- **F. Respiratory rate**

**Answer: B,D,F**

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

Children compensate for shock through increased heart rate, respiratory rate, and vasoconstriction, which delays blood pressure drop.

Therefore:

- \* Tachycardia is often the first sign
- \* Prolonged capillary refill (>2 seconds) is an early indicator
- \* Tachypnea supports perfusion

Blood pressure is a late sign in pediatric shock. SpO# is helpful but does not specifically indicate shock. Blood glucose may be abnormal in other metabolic conditions but is not an early marker of volume loss.

References:

NREMT Pediatric Assessment Flowchart

PALS Guidelines - Recognition of Shock in Children

AAOS Emergency Care and Transportation (11th ed.), Chapter: Pediatric Shock

#### NEW QUESTION # 43

A 27-year-old patient is under arrest and in handcuffs after an altercation with police. The patient has a swollen left wrist that is tender to the touch. There is no deformity to the wrist, and distal pulses are present.

The EMT is considering the following transport options:

- \* Option 1: Transport the patient in the ambulance, handcuffed, with the key-holding officer following the ambulance in a police car.
- \* Option 2: Transport the patient in the ambulance, but exchange the handcuffs for locking leather restraints to which the EMT has a key.

Which of these options should the EMT choose, if either?

- A. Either option
- B. Neither option

- C. Option 2 only
- D. Option 1 only

**Answer: C**

Explanation:

NREMT guidelines emphasize that EMTs must be able to rapidly release any restraints applied to a patient in the event of airway compromise, vomiting, cardiac arrest, or sudden deterioration.

Option B is correct because exchanging handcuffs for EMS-controlled restraints ensures patient safety while maintaining custody. The EMT having the key allows immediate access if emergency care is required.

Option A is unsafe because the EMT does not have control over the restraints, potentially delaying lifesaving interventions.

Option C is incorrect because patient safety standards must always be met.

Option D is incorrect because transport is necessary for evaluation and care.

NREMT stresses that custody never supersedes patient safety, and EMS must maintain control of patient restraints during transport.

#### NEW QUESTION # 44

The crew is requested to respond by law enforcement to a riot scene in a large downtown area. Upon arrival, the EMT notices the police are in full riot gear, with multiple persons lying on the ground under arrest. There is a strong odor of chemicals in the air. What actions should the EMT prioritize during the scene survey?

Select the two answer options that are correct.

- A. Have the police remove the patients' restraints.
- B. Determine the control agent being used.
- C. Remove the patients' clothing prior to triaging.
- D. Identify the number of patients.
- E. Flush the patients' eyes with water or saline.

**Answer: B,D**

Explanation:

Comprehensive and Detailed Explanation (Based on NREMT standards):

This scenario strongly suggests a hazardous environment involving chemical crowd-control agents such as tear gas or pepper spray. During the scene survey, NREMT prioritizes scene safety, hazard recognition, and incident size-up before any patient contact.

Option D (Determine the control agent being used) is correct because identifying the chemical agent helps determine the level of risk, appropriate personal protective equipment, and whether EMS can safely operate in the area.

Option E (Identify the number of patients) is correct because determining the number of patients is essential for assessing the scope of the incident and requesting additional resources if needed.

Option A is incorrect because removing restraints is not part of the initial scene survey and must be coordinated with law enforcement.

Option B is incorrect because patient decontamination occurs only after scene safety is ensured.

Option C is not a priority until hazards are identified and the scene is safe.

NREMT teaches that EMTs must never compromise their own safety and must fully assess hazards before providing care.

#### NEW QUESTION # 45

What are the greatest morbidity risks associated with poorly controlled patient agitation in patients exhibiting delirium? Select the two answer options that are correct.

- A. Hemorrhagic stroke
- B. Seizure activity
- C. Positional asphyxia
- D. Hypovolemic shock
- E. Sudden cardiac arrest

**Answer: C,E**

Explanation:

The correct answers are B. Positional asphyxia and E. Sudden cardiac arrest.

This question refers to patients with severe agitation or delirium, often described in EMS as excited delirium syndrome or severe behavioral emergencies.

Why B is correct (Positional asphyxia):

Agitated patients who are restrained improperly (especially in prone positions) are at high risk of

Restricted chest wall movement

Impaired ventilation

Hypoxia

NREMT-aligned guidance emphasizes:

"Improper restraint positioning can lead to positional asphyxia."

This is a major cause of morbidity and death in agitated or restrained patients.

Why E is correct (Sudden cardiac arrest):

Severely agitated or delirious patients are at risk of:

Extreme catecholamine surge

Metabolic acidosis

Cardiac dysrhythmias

These can rapidly lead to sudden cardiac arrest.

NREMT materials highlight:

"Patients with severe agitation are at risk for sudden cardiac arrest."

"Excited delirium may result in sudden death if not properly managed."

Why the other options are incorrect:

A). Seizure activity: Not a primary or common morbidity risk directly associated with agitation.

C). Hypovolemic shock: Not typically related to agitation unless trauma or bleeding is present.

D). Hemorrhagic stroke: Not a typical complication of agitation/delirium in EMS context.

Exact Extracts:

"Improper restraint can result in positional asphyxia."

"Excited delirium is associated with sudden cardiac arrest."

"Agitated patients require careful monitoring due to risk of sudden death." References:

NREMT EMT Education Standards - Medical Emergencies (Behavioral and Psychiatric Disorders) NREMT National Continued

Competency Program (NCCP) - Behavioral Emergencies Prehospital Emergency Care (EMT) - Behavioral Crisis Management

## NEW QUESTION # 46

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